



NMCPHC UPDATE

Volume 10 Issue 4

From the Front Office

By Captain Robert J. Hawkins, Commander, NMCPHC

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Greetings Navy and Marine Corps Public Health Center (NMCPHC)

Since our last newsletter, the COVID-19 pandemic emerged as a global phenomenon that essentially turned the world of public health on its head. The tectonic shift in how we, as a public health organization now do business is significant. Back in February, when COVID-19 morphed from a “contact on our radar that we’re tracking” to “CBDR” (ask any SWO the significance of that designation), we began to recognize the need to change our business model. Our initial approach involved a select few of our subject matter experts responding to the typical issues, questions and concerns expected with any disease outbreak. We had no idea that within a few short weeks we’d be dealing with a global pandemic the likes of which our world... let alone our Navy, hasn’t seen in decades. Needless to say, resources can get tapped pretty quickly when the number of RFIs change both in total number and requestor (four star-level “need to know now” became the norm.) In order to respond to the increase in COVID-related workload, we developed a concept of operations for a multi-disciplinary (holistic) team approach that also ensured we had public health expertise available around the clock. In the subsequent weeks and months, we’ve responded to nearly 300 requests for support ranging from policy development, Fleet guides, and congressional taskers to actual “boots on ground” SME support. At this point, I would be remiss if I didn’t give a special “shout out” to my deputy commander CAPT Troy Delong. He conceived what’s now our “Emergency Operations Center” (EOC) made up of public health experts from across our HQ, with support from our field activities. The EOC is divided into two teams providing COVID-coverage 24/7. While the “op-tempo” might not always require a permanent 24/7 EOC watchbill as it has during the COVID crisis, our multi-disciplinary approach to managing public health threats and outbreaks will be our working model going forward. I don’t typically use this newsletter space to get into “sausage making” ... but sometimes there’s value in knowing and understanding the process – especially one that works. Speaking of which... the process is only as good as the individuals that make



value in knowing and understanding the process – especially one that works. Speaking of which... the process is only as good as the individuals that make it tick. I cannot possibly thank enough the EOC team members for their dedication, hard work and countless 24 hour work-days! Much of this was accomplished in a telework environments... which presents its own set of unique and technological challenges. Led by CAPTs Jesse Geibe and Michelle Waara, the EOC made the impossible “possible”... answering every tasker on time, regardless of deadline. CAPT Waara moved on to a new executive medicine assignment Director for Nursing Services at NMRTC Lemoore. Her contributions to Navy public health are too numerous to mention here. I wish her “fair winds and following seas.”

In closing, I must thank the entire Navy public health enterprise, including our HQ staff, field activities, and those of you assigned to headquarters elements, operational units or Fleet Medical staffs. Your dedication during this challenging time has been nothing short of remarkable. That said, we owe it to our customers... the deckplate Sailor and Marine that depend upon our public health expertise day in and day out, to continue taking the fight to this unseen enemy that continues to threaten our readiness.

WE'RE ON INSTAGRAM, FACEBOOK AND TWITTER FOLLOW US @NMCPHC

**TO STAY ON
TOP OF THE
LATEST
TRENDS IN
NAVY PUBLIC
HEALTH AND
COVID-19**



Command Master Chief's Corner

By Master Chief Petty Officer (MCPO) Joseph Dennis, NMCPHC



Greetings Shipmates!

In the 4 months since CMC turnover, I've noticed the only constant is change. As we continue to live in the COVID-19 pandemic, it is imperative to be physically, mentally, and emotionally agile in response to changing times. It is easy to become overwhelmed with local, state, and federal guidelines that are evolving. There are many resources available via the COVID-19 toolbox in the NMCPHC webpage, the Commander's weekly update email, Navy Personnel Command webpage, and various state, local, and federal public health websites.

Congratulations to HM1 Kang (NEPMU 2) HM2 Butler (NEPMU 5) and HM3 Molina (NEPMU 6) for their recent advancement. Well Done!

Executing Permanent Change of Station (PCS) orders, conducting Temporary Additional Duty (TAD) Travel, and going on leave can be difficult to navigate. Stay connected to Navy Personnel Command on social media [MyNavy HR (Facebook), @USNPeople (Instagram) @MyNAVYHR (Twitter)] message traffic, or the web for the latest on PCS travel waivers and Restriction of Movement (ROM) requirements. For the latest on TAD or leave/liberty travel, see local NMCPHC policy.

In these trying times, it is vital that we protect the Force to accomplish the mission. Every shipmate – Active duty and Civilian – is an important member of the team. We must remain diligent in our efforts to slow the spread of disease. Equally important is the need to look out for one another. Depression, suicidal behavior, alcohol abuse, and domestic violence are all on the rise in our Navy. Seek help if you need it, and offer help if you can.

July 26th was the 72nd anniversary of President Truman signing Executive Order 9981, which established a committee dedicated to ending segregation in the military. In June of 2020, Task Force One Navy was stood up to identify barriers that negatively affect equal opportunity, diversity, and inclusion for everyone in our Navy. Locally, NMCPHC conducted focus group discussions on issues of diversity and inclusion. Our work is not complete. As we continue to strive for an inclusive Navy without bias, every person has a role. If interested in being involved at the Command level, see Chief Delita Shields for the Diversity Committee and LCDR Selena Hayes for the Command Resiliency Team.

Looking forward, as we transit through the pandemic and many of the restrictions are lifted, we will resume Quality of Life (QOL) committee functions, in-person diversity celebrations, Commander's PT, and our partnership with local STEM programs. Be on the lookout for these and other programs to resume operations after restrictions are lifted.

NEPMU-2 provides fleet essential tools and training in the fight against COVID-19

BY Lt. Peter Y. Mercredi, Navy Environmental and Preventive Medicine Unit TWO Public Affairs

In support of COVID-19 response, Navy Environmental and Preventive Medicine Unit TWO (NEPMU-2) was deployed to Naples and Sigonella, Italy, and Rota, Spain, March 13.

To help provide COVID-19 testing capabilities to forces outside of the contiguous United States (OCONUS), NEPMU-2 subject matter experts (SMEs) delivered COVID-19 diagnostic testing equipment as well as specimen collection and processing training.

The following week, NEPMU-2 prepared to support both the USNS Comfort (T-AH 20) and USNS Mercy (T-AH 19) missions. NEPMU-2 sent a biochemist to the USNS Mercy, augmenting a West Coast Forward Deployable Preventive Medicine Unit in support to the city of Los Angeles, California, and sent a microbiologist, environmental health officer, medical laboratory technician and three preventive medicine technicians for the deployment of the USNS Comfort to New York City. Both teams were equipped with COVID-19 diagnostic testing capabilities.

“We at the NEPMUs serve the public health needs of the Navy with a variety of skillsets and expertise,” said Cmdr. Steven Schutt, Officer in Charge, NEPMU-2. “I couldn’t be more proud of the work that has been done and the contributions that have been made by the staff here at NEPMU-2 in response to COVID-19.”

NEPMU-2’s early support was essential to ships, which are particularly challenging because they do not easily permit social distancing, allow for alternative work locations, or have dedicated isolation rooms. Moreover, infections causing only mild symptoms can cause loss of workdays that may multiply exponentially per each infected sailor.

“This pandemic has had an unprecedented and almost unimaginable impact on the work and home lives of our Sailors, Marines, and civilian personnel. It has had nearly as much impact on our operational forces. It has been a tremendous honor to serve at NEPMU-2 during this time, as many of our Sailors have responded around the globe at a moment’s notice, and many work round-the-clock alongside our Navy Medicine brothers and sisters to keep our Navy, Marine Corps, and Joint team safe. I know that this unit, and our sister NEPMUs, will continue to do everything humanly possible to support our Fleet, FMF, MTFs, and Installations, and keep them safe and ready in the face of this unprecedented challenge,” said Cmdr. John Owings, Assistant Officer in Charge, NEPMU-2.

NEPMU-2 SMEs have also been sent to Naval Medicine Readiness and Training Command (NMRTC) Great Lakes, NMTRC Jacksonville, NMTRC Quantico, as well as NMRTC Portsmouth, to provide direct support and guidance to the NMRTCs and the regional Naval Branch Health Clinics under their purview. SMEs assisted with outbreak investigations, aggressive contact tracing, and advised on mitigation measures to prevent the spread of COVID-19. NEPMU-2 also supported Military Sealift Command’s disinfection capabilities as well as provided COVID-19 diagnostic test training and ventilation surveys.

Since March, NEPMU-2 has responded to more than 10 COVID-19 specific missions. Also, NEPMU-2 SMEs provided just-in-time COVID-19 diagnostic test training certifications to over 19 ships and units to prepare the entire area of responsibility with essential diagnostic capabilities in the fight against COVID-19.



NORFOLK (June 15, 2020) Hospital Corpsman 1ST Class Nsikanete Davis (Left) and Hospital Corpsman 1st Class John Brickson (back) perform “just-in-time” training to Fleet Surgical Team Hospital Corpsman 2nd Class Terrelle Senette (center) and Hospital Corpsman 2nd Class Joseph Bice (right). U.S. Navy photo by Public affairs Officer Lt. Peter Y. Mercredi (released)



NORFOLK (July 03, 2020) Hospital Corpsman 1ST Class Jermaine English prepares NEPMU-2 sailors for an all-hands briefing from Cmdr. Steven Schutt. U.S. Navy photo by Public affairs Officer Lt. Peter Y. Mercredi (released)

Did you know NMCPHC just got a new look?



Make sure all your current and future documents, templates and other materials contain the new logo and branding.

To find the latest versions of all NMCPHC templates, click the link below:

<https://esportal.med.navy.mil/sites/nmcphc/Pages/NMCPHC-Intranet-Dashboard.aspx>

For more information Contact Hugh Cox at (757) 953-0969

Navy Entomology Center Supports African Partners In Fight Against Malaria

By Hugh Cox, Navy and Marine Corps Public Health Center, Public Affairs

The Ghana Armed Forces (GAF), a strategic military partner of the United States, received a supply of mosquito surveillance and control equipment courtesy of the Navy Entomology Center of Excellence (NECE), August 2020.

The shipment, which also included needed laboratory supplies, was the first of many and will play an integral role in GAF's ability to combat malaria.

Malaria is the leading disease threat to the Department of Defense (DoD), and the focus of the Africa Malaria Task Force (AMTF). AMTF was started in 2011 by USAFRICOM to improve DoD's military partners' fight against malaria by bringing leaders and experts together facilitating a multi-country African military to military collaboration.

In 2019, the World Health Organization reported that Africa as a whole has the highest number of reported cases of malaria mainly attributed by insecticide resistance, expensive alternatives insecticides, and lack of access of care. Ghana and Nigeria lead with the most malaria cases.

The impact of infectious diseases threats on Service Members in such an environment is amplified, so prevention is critical for maintaining combat effectiveness. A unit deployed to a high-risk malaria endemic area for an extended period that experiences delays in resupply of diagnostic tests, preventative and treatment drugs can rapidly succumb to infection and rendered combat ineffective.

"The project is a great demonstration of the importance of a strong Operational Entomology Program as well as an Integrated Vector Management strategy that directly impacts Force Health Protection and Readiness," said Capt. George Schoeler, NECE Officer in Charge.

Funding for the project comes from the Global Health Research Initiative (GHERI). The project is managed by the Center of Global Health Engagement at the Uniformed Services University, which supports operational research efforts endorsed by and at the service of Combatant Commands (CCMDs).

GHERI's portfolio consists of research projects that meet the demand signal of CCMDs, captured through the Joint Staff Surgeon's Office, and focuses on research topics that support operational efforts that will meet the needs of the Joint Forces.

NECE's GHERI project will use previously acquired skills from

the AMTF tactical training as the foundation to create a data driven entomology program contributing to a holistic control program. This program will establish a regional entomology hub in West Africa for other AMTF partners to benefit from in the future.

"NECE's global health projects inherently have mutual capacity building benefits for our partners as well as allows NECE and other DoD laboratories to leverage these multinational efforts in the interest of Public Health," added Schoeler.

A primary goal of the AMTF is to assist partner militaries in supporting the development of relationships with their National Malaria Control Programs (NMCP). Based on that goal, future AMTF events will take "whole of government" approach bringing all stakeholder agencies together, building sustainable partnerships between Ghana's Ministry of Defense (MoD) and the Ministry of Health (MoH).

"As a US Navy public health professional, it has been rewarding to work with our international partners to build capacity to make such a positive impact," added Hospital Corpsman 1st Class Lydia Alphonse, NECE Leading Petty Officer and GHERI Project Coordinator.

Enhancing one of the stronger AMTF partners such as GAF with a comprehensive entomology research and control program that can be leveraged by Ghana's MoH and other regional partners comes at a critical time for malaria control efforts. Since 2001, there was a significant decline in malaria prevalence in endemic areas across Africa.

"One of the major goals of this project is to establish a sustainable entomology laboratory for the Ghana Armed Forces and Ghana Police Services," said Navy entomologist Lt. Cmdr. Joseph DiClaro, NECE AOIC and Principal Investigator. "This lab is to not only benefit the Ghanaian Public Health initiatives, but serve as a regional hub to meet AFRCIOM Africa Malaria Task Force Objectives."

New Tobacco Regulations and Resources

By Hugh Cox, Navy and Marine Corps Public Health Center, Public Affairs

With the recent changes in legislation making it illegal for retailers to sell tobacco products to those under age 21, the Navy and Marine Corps Public Health Center (NMCPHC) is leveraging its tobacco cessation resources to help Sailors and Marines become tobacco free. Service members must now be 21 to purchase any type of tobacco product including e-cigarettes or vapes, at all installations and facilities in the U.S., its territories and possessions and on Navy ships in U.S. ports.



Photo by Pfc. Samuel Ellis, Marine Corps Base Quantico

The legislation, known as “Tobacco 21” (or T21), was enacted Dec. 20, 2019 and went into effect on military installations in the U.S. on Aug. 1, 2020. T21 makes it illegal for a retailer to sell any tobacco product—including cigarettes, cigars, and e-cigarettes—to anyone under 21. The new federal minimum age of sale applies to all retail establishments and persons with no exceptions, including military personnel.

The goal of this law is to decrease tobacco use by targeting age groups when most people start using tobacco. For Sailors and Marines who are impacted by the law and ready to quit, NMCPHC is ramping up its efforts to promote tobacco cessation resources and tools available to service members. This includes counseling and medication available through your MTF, BAS and ships, as well as a 24/7 live chat service and resources available through the DOD’s YouCanQuit2 campaign. This information and more can be found on the NMCPHC Tobacco Free Living page.

“If you use tobacco, consider quitting,” said Dr. Mark Long, NMCPHC Public Health Educator and Tobacco Cessation Program Manager. “No matter your age, it is never too early or too late to quit smoking, spitting or vaping. The health effects are immediate and a result of quitting, you’ll save money and reduce your risk of some negative health

outcomes later in life.”

According to Long, resources are also available for health promoters, health care providers, supervisors and others that provide support to tobacco users looking to quit the addiction.

“There are many reasons to quit tobacco. Find your reason, and check out the many resources, programs and tools available to help you become tobacco free. You don’t have to go this alone,” said Long.

“Tobacco use is one of the hardest habits to kick, I know from past personal experience,” said NMCPHC Command Master Chief Joseph Dennis. “Preventing Sailors and Marines from establishing this addiction and assisting those who are ready to quit makes us a more ready force and reduces death and illnesses due to cancer and other

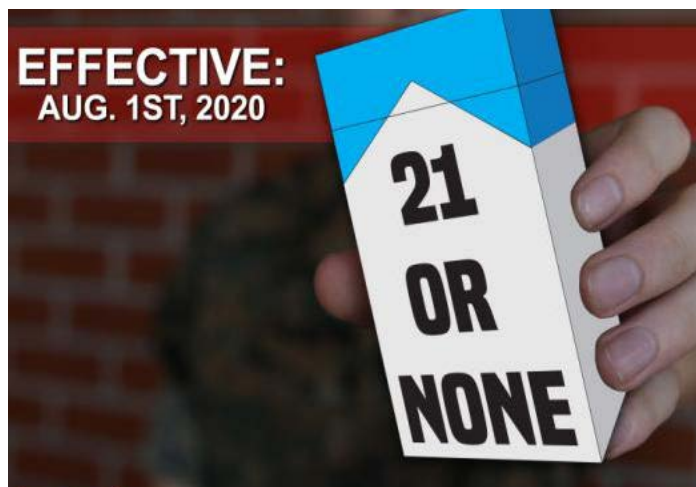


Photo by Lance Cpl. Aliannah Bartok, Marine Corps Air Station Cherry Point

tobacco associated diseases. Quitting isn’t easy, but it’s always a good time to quit tobacco.”

For more information on tobacco cessation, visit NMCPHC’s Tobacco Free Living Pages at: <https://www.med.navy.mil/sites/nmcphc/health-promotion/tobacco-free-living/Pages/Tobacco-ForYouSelfHelp.aspx>.

KEEP YOUR HEALTH IN CHECK:

LIVE A TOBACCO-FREE LIFE

YOU CAN **QUIT2**

As a Service member, you're most likely healthy and physically fit. Why not keep it that way by living a tobacco free life?

USE THIS CHECKLIST AS A GUIDE TO KEEP YOUR HEALTH IN CHECK!

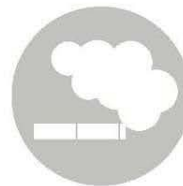
☐ Stop Social Smoking

- Smoking even one cigarette or hookah can cause addiction and harm your health.
- Smoking e-cigarettes and JUULs may also cause addiction because they can contain harmful chemicals and nicotine.
- You are still at risk for addiction even if you:
 - Only smoke when you drink alcohol;
 - Only smoke when TAD/TDY or deployed;
 - Smoke just a few cigarettes a week; OR
 - Only smoke with friends.



☐ Avoid Secondhand Smoke

- Secondhand smoke occurs when a smoker breathes out smoke and others breathe it in. This includes smoke from cigarettes, pipes, hookah or cigars.
- Inhaling secondhand smoke, even for just a short time, can cause you to develop breathing problems. Think twice before you follow your buddy to the DTUA.



☐ Visit Your Dentist

- Using cigarettes or any form of smokeless tobacco can increase your risk of developing oral health problems such as gum disease and oral cancer. Did you know that gum disease can keep you from deploying?
- During your next dental exam, let your dentist know if you have red or swollen gums, sensitive teeth or if it is painful to chew or swallow. These are all symptoms of gum disease or oral cancer.



☐ Talk To Your Provider

- Tobacco users may feel healthy, but a provider can help you identify if there are other health concerns you need to address. Talk to your provider about any health concerns you may have.
- Early detection could save your life. Talk to your provider about screenings you may need as a current or former tobacco user.



Learn more at [ycq2.org](https://www.ycq2.org)

Contact Us: dha.ncr.comm.mbx.u-can-quit-2-quit-tobacco@mail.mil



Additional resources are also available through YouCanQuit2: <https://www.ycq2.org/>

Ticks and What You Can Do About Them

Story Courtesy of Navy and Marine Corps Public Health Center

Tick season in most areas of the U.S. begins in April and lasts throughout the warmer months, with bite cases trailing off around September, though activity is reported year-round.

With the range of many tick species expanding by over 300% since the late 1990's and Lyme disease cases almost doubling from 17,000 in the year 2000 to an estimated 30,000 cases in the United States today, the likelihood for Navy and Marine Corps personnel to encounter a disease-carrying ticks is high.

"Superimposing a map of DoD locations in the United States over the distribution of ticks and tick-borne disease illustrates why the DoD public health community must take every opportunity to reduce the risk of tick-borne disease to our personnel," said Navy Entomologist Lt. Cmdr. Michael Kavanaugh, with the Armed Forces Pest Management Board in Silver Spring, MD.

It is best to always remove a tick as soon as possible. Ticks can be submitted to the Tick-Borne Disease Laboratory as part of the Military Tick Identification/ Infection Confirmation Kit (MilTICK) program, formerly known as the DoD Human Tick Test Kit program. When received, the species will be identified and tested for the presence of illness-causing pathogens. Test results are generally reported within two weeks. The MilTICK program is available for all DoD employees and dependents.

Due to increased risk posed by ticks and the death of Senator Kay Hagen from complications due to Powassan virus in October of 2019, the Kay Hagen Tick Act was signed into law on December 2019.

One of the provisions of the Act is the development of a National Vector-borne Disease Strategy to combat tick-borne illness by expanding research, improving testing and treatment, and coordinating efforts across federal agencies and the DoD.

"Tools, to include the MilTICK test, and other surveillance efforts provide critical information necessary to better identify high risk areas at military installations, resulting in proactive control strategies to maximize personnel readiness," said Kavanaugh. "These prevention and control efforts align with DoD vector-borne disease program objectives as part of the whole of government approach reflected in the National Vector-borne Disease Strategy."

Instructions on how to properly remove a tick and submit it to the MilTICK program can be found at the link below: https://phc.amedd.army.mil/PHC%20Resource%20Library/HowtoCheckforTicksandRemoval_FS_18-092-0919.pdf

Other tick resources are available through the Navy Entomology Center of Excellence (NECE). For more information, visit their website at: <https://www.med.navy.mil/sites/nmcphe/nece/Pages/default.aspx>



Photo By Graham Snodgrass < Caution-<https://www.dvidshub.net/portfolio/1384877> > | A highly magnified ventral shot of a female Ixodes scapularis tick, otherwise known as the Deer Tick, a primary vector for Lyme Disease. The U.S. Army Public Health Center offers free identification and analysis of ticks that have been removed from human patients for Department of Defense beneficiaries through its MilTICK testing program. (U.S. Army Public Health Center photo by Graham Snodgrass)



A Lone Star tick was spotted recently during an environmental survey at Fort Drum, serving as a reminder for community members about ways they can prevent tick bites while enjoying the outdoors. (U.S. Army photo)

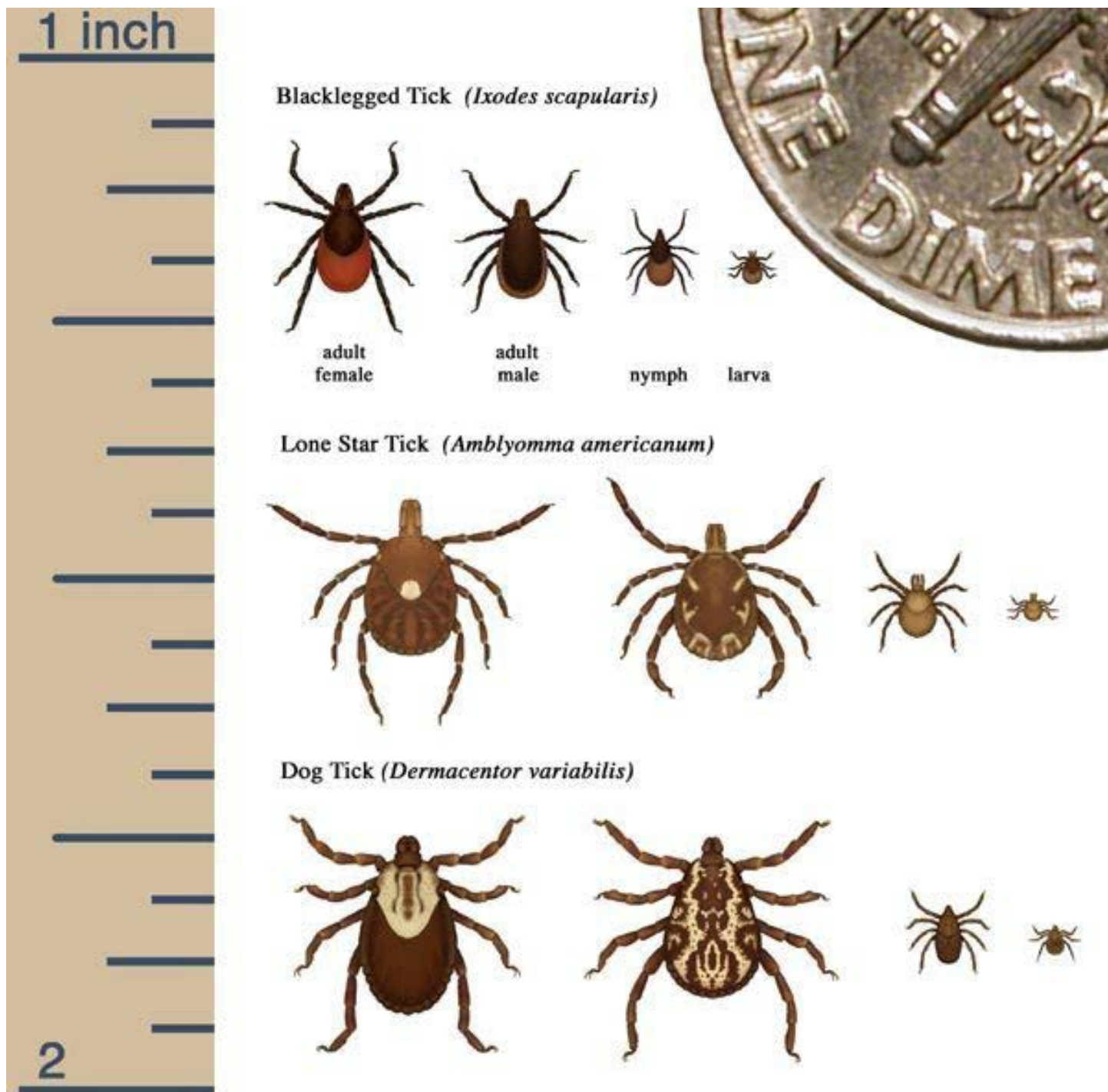


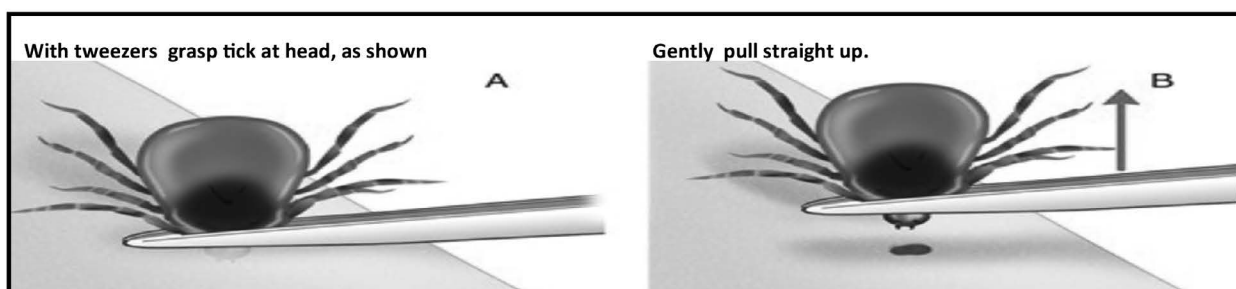
Photo By Robert K Lanier < Caution-<https://www.dvidshub.net/portfolio/1302814> > | This is a photo illustration of a Black-legged Tick, a Lone Star Tick, and a Dog Tick - in relation to Lyme Disease.

MiLTiCK

Military Tick Identification/Infection Confirmation Kit

Who can submit a tick? Individuals in the following categories are eligible to submit ticks to MiLTiCK:

- ☑ **All Service Members** (active, retired)
- ☑ **Civilian or Contractor** personnel working for the DOD or any of the Services (including Army Corps of Engineers)
- ☑ **Beneficiary** (spouses, parents, or children of all above categories)



I found a tick on myself or my dependent! How do I submit a tick for testing? To determine the fastest way to submit your tick to MiLTiCK, follow the below decision tree:

I have removed a tick from myself or a dependent and am eligible to submit the tick to MiLTiCK. Or I had a tick removed from myself or my dependent by my non-DoD provider (ex: Martin's Point providers or Urgent Care center.)

Seal your tick in two re-sealable plastic bags for storage until it can be put in the kit plastic vial.

I am at or can easily get to a DoD Clinic (Guthrie, TMC.)

Submit your tick to clinic staff; they will fill out the paperwork and submit the tick to MiLTiCK for you. You will be contacted with the results of the tick testing in 2-10 days.

I do not have a tick kit.

Contact Fort Drum Environmental Health department at 315-772-7678 for options to get a kit or submit tick to the EH department.

I have a tick kit at home.

Follow the instructions in your tick kit, fill out submission form. Place your tick in the plastic vial.

If you don't have the kit, place the tick in a ziplock bag.

Include the USDA permit included in the pre-addressed envelope. Submit to EH department for handling.



Environmental Health Department
S-19 First West St.
Fort Drum, NY 13602
Phone: 315-772-7678

Courtesy Photo | Fort Drum community members can take advantage of the free MiLTiCK program at Environmental Health, Bldg. 19 on First West Street. Army Public Health Command recently updated the Military Tick Identification / Infection Confirmation Kit (MiLTiCK) program to increase the availability for submitting ticks for testing. All active and retired service members, DoD civilians and contractors, and beneficiaries are eligible for this program. (Fort Drum MEDDAC Environmental Health)

Presence and Partnerships: NEPMU-5's Fight Against COVID-19

Story by André Sobocinski U.S. Navy Bureau of Medicine and Surgery

In Case You Missed It



Photo By Petty Officer 2nd Class Joseph Millar | Naval Base San Diego (May 29, 2020) – A Sailor assigned to the guided-missile destroyer USS Kidd (DDG 100) has his temperature checked as he returns to the ship as part of the Navy's aggressive response to the COVID-19 outbreak onboard. In order to be cleared to return to the ship, Sailors must have received two separate negative test results. Kidd arrived in San Diego April 28 to receive medical care for its Sailors and clean and disinfect the ship following a COVID-19 outbreak while underway. The crew will continue the strategic deep-cleaning regimen in accordance with established Navy and Centers for Disease Control and Prevention guidance prior to continuing her scheduled deployment. (U.S. Navy photo by Mass Communication Specialist 2nd Class Alex Millar)

When the first case of COVID was suspected aboard USS Kidd, an Environmental Health Officer (EHO) from Naval Medical Preventive Medicine Unit (NEPMU) No. 5 was in constant communication with the ship's Independent Duty Corpsman (IDC), providing updated guidance and protocols to support shipboard contact tracing and sanitation procedures. Other members of NEPMU-5 were among a contingent of medical personnel from multiple units to screen the disembarking Sailors when the ship arrived at San Diego.

The COVID-19 pandemic may have posed new challenges for the U.S. Navy and nothing may be quite comparable to its devastation in recent memory, but in many respects San Diego's NEPMU-5 was tailor-made for this fight.

One of the Navy's original preventive medicine units, NEPMU-5 was born in March 1949 when the Navy consolidated the duties of World War II-era epidemiology teams into specialized units at Norfolk, Virginia, Camp Lejeune, North Carolina., Great Lakes, Illinois, San Diego, California, and Pearl Harbor (then in the Territory of Hawaii) Their original mission was to investigate disease outbreaks stateside and overseas; conduct sanitary inspections and surveys of disease vectors; and oversee the sanitary control of food, water, waste disposal and living quarters throughout the Navy and Marine Corps.

Today, NEPMU-5 is one of four remaining units located in Norfolk, Virginia. (No. 2), Pearl Harbor, Hawaii (No. 6), and Rota, Spain (No. 7) that fall under the command of the U.S.

Navy and Marine Corps Public Health Center (NMCPHC) in Norfolk, Virginia.

"I always like to view us as a small CDC (Centers for Disease Control and Prevention)," said Capt. Peter Obenauer, OIC of NEPMU-5 since 2018.

Among the 85 members of Capt. Obenauer's unit are preventive medicine officers, environmental health officers, industrial hygiene officers, entomologists, microbiologists, preventive medicine technicians and laboratory technicians and an audiologist. Combined, this small but robust team provides frontline support and guidance to the Fleet, the United States Marine Corps, and shore establishments.

As an operational unit, NEPMU-5's mission success is built on the relationships with the fleet and shore units. "We provide boots on the ground for shore and fleet units to support disease outbreaks, we have an established relationship that facilitates communication and coordination," said Cmdr. Gary Brice, NEPMU-5's Assistant Officer in Charge. "And we provide the support, guidance and the expertise that allows organic units to handle routine types of disease outbreaks in an efficient and timely manner."

Prior to the pandemic, NEPMU-5 was heavily involved with non-stop shipboard investigations into TB, parotitis and diarrheal disease outbreaks. The unit was also actively monitoring news of an acute respiratory syndrome first reported in Wuhan, China in 2019. By mid-January 2020, NEPMU-5 began notifying Third Fleet as well as several Type Command (TYCOM) surgeons about their concerns. "We monitor these outbreaks globally, because we recognize that deployed military personnel may be exposed to new emerging pathogens such as COVID-19, and locally endemic pathogens to which they may lack immunity," said Brice.

Among NEPMU-5 initial efforts was coordinating with the Armed Forces Health Surveillance Branch (ADHSB) as well as the CDC to try to get more information for the Navy. Soon after, NEPMU 5's parent command tasked several deployable preventive medicine teams to support the Cobra Gold Exercise in Thailand. Collectively the individual NEPMUs sent forward deployed teams to USS America, USS Blue Ridge and USS Teddy Roosevelt where they brought laboratory capabilities to detect COVID and other diseases.

As COVID-19 began taking a toll on Italy, NEPMU-5 deployed Environmental Health Officers to Naples and Sigonella to operate as Public Health Emergency Officers. When the hospital USNS Mercy sailed into Los Angeles to serve as a "relief valve" for the overburdened health care system, an occupational medicine physician, a microbiologist, an environmental health officer, multiple preventive medicine technicians and a laboratory tech from NEPMU-5 were on board.

The need for public health specialists in the Navy is not without some burdens for the unit's leadership, however. "At one time, just within the time period of the last six months we had almost 15 people deployed out of here,

which puts a tremendous amount of stress not only on the individuals here, but our mission in San Diego," Obenauer remarked. "So trying to push people out the door to support those ships puts additional challenges on folks back here to compensate for their departure." It is the dedication to the mission and resilience that Obenauer is most proud of and he points to the fact some members of his team volunteered for redeployment within 48 hours of returning from their original deployments.

One of the more well-known NEPMU-5 interventions in the pandemic was its support of the USS Kidd outbreak in April. Lt. Dawn Whiting, EHO with NEPMU-5, was in early communication with the destroyer's IDC when he first suspected a sailor's GI symptoms as being coronavirus. She provided him with NEPMU-5's newly developed toolkit that included the latest COVID guidance for ships underway, worksheets for contract tracing, and mitigation measures. This information would ultimately lead to the deployment of Naval Hospital Jacksonville's Rapid Response Team to Kidd and the medical evacuation of Sailors to USS Makin Island.

When Kidd arrived at San Diego on April 28th, NEPMU-5 was pierside processing the Sailors disembarking the ship. As Brice explained, "I think it took us about six hours to go through the whole iteration, but we collected swabs on all the Sailors including those who rode back aboard Kidd. And we also conducted a serological screening for antibodies."

The screening was done in partnership with the Medical Readiness Division and Naval Health Research Center (NHRC) and, in many respects is reflective of the ongoing collaborative efforts key to NEPMU-5's mission success.

Obenauer added, "I think one of the lessons learned during this pandemic was having strong established relationships with the fleet and shore units is critical. No one can do it on their own, it's a huge team effort."

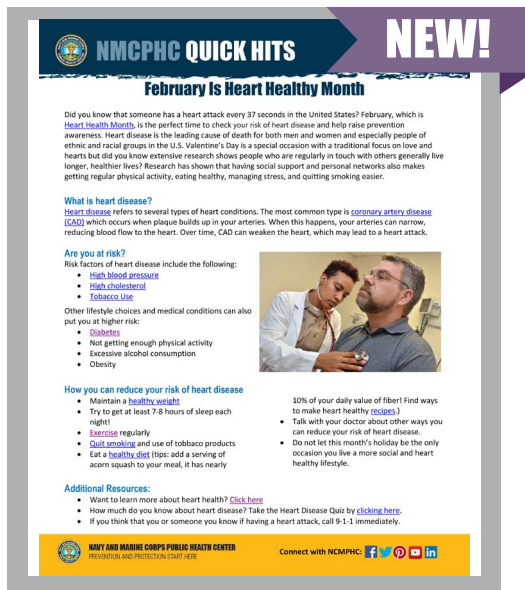
And whether working with fellow preventive medicine units, with Medical Treatment Facilities (MTFs), Third Fleet, Commander, Submarine Force, U.S. Pacific Fleet (SUBPAC), Commander, Naval Surface Force Pacific (SURFPAC), Commander Naval Air Force, U.S. Pacific Fleet (AIRPAC), Military Sealift Command (MSC), medical laboratories, or with other federal agencies like CDC, NEPMU-5 credits these relationships as the root of their effectiveness during this pandemic.

"It's definitely not just us," said Brice. "Keep in mind this is almost like a symphony and everybody's doing their part in this fight. And when you're in synch, you're making great music."

<https://www.dvidshub.net/news/372371/presence-and-partnerships-nepmu-5s-fight-against-covid-19>

NMCPHC Product Spotlight

Quick Hit: February Is Heart Healthy Month



NMCPHC QUICK HITS **NEW!**
February Is Heart Healthy Month

Did you know that someone has a heart attack every 37 seconds in the United States? February, which is **Heart Healthy Month**, is the perfect time to check your risk of heart disease and help raise prevention awareness. Heart disease is the leading cause of death for both men and women and especially people of ethnic and racial groups in the U.S. Valentine's Day is a special occasion with a traditional focus on love and hearts but did you know extensive research shows people who are regularly in touch with others generally live longer, healthier lives? Research has shown that having social support and personal networks also makes getting regular physical activity, eating healthy, managing stress, and quitting smoking easier.

What is heart disease?
Heart disease refers to several types of heart conditions. The most common type is **coronary artery disease (CAD)** which occurs when plaque builds up in your arteries. When this happens, your arteries can narrow, reducing blood flow to the heart. Over time, CAD can weaken the heart, which may lead to a heart attack.

Are you at risk?
Risk factors of heart disease include the following:

- High blood pressure
- High cholesterol
- Tobacco Use

Other lifestyle choices and medical conditions can also put you at higher risk:

- Diabetes
- Not getting enough physical activity
- Excessive alcohol consumption
- Obesity

How you can reduce your risk of heart disease

- Maintain a **healthy weight**
- Try to get at least 7-8 hours of sleep each night
- **Exercise regularly**
- **Quit smoking** and use of tobacco products
- Eat a **healthy diet** (this: add a serving of acorn squash to your meal, it has nearly 10% of your daily value of fiber! Find ways to make heart healthy **recipes**.)
- Talk with your doctor about other ways you can reduce your risk of heart disease.
- Do not let this month's holiday be the only occasion you live a more social and heart healthy lifestyle.

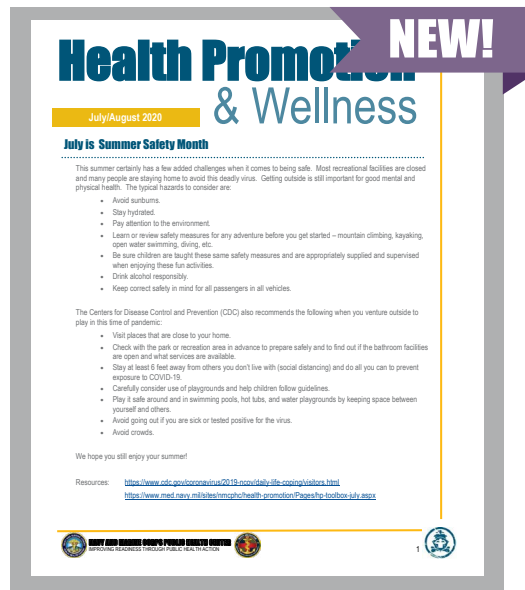
Additional Resources:

- Want to learn more about heart health? [Click here](#)
- How much do you know about heart disease? Take the Heart Disease Quiz by [clicking here](#).
- If you think that you or someone you know if having a heart attack, call 9-1-1 immediately.

NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTION AND PROTECTION START HERE

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July/August HPW Newsletter



Health Promotion & Wellness **NEW!**
July/August 2020
July is Summer Safety Month

This summer certainly has a few added challenges when it comes to being safe. Most recreational facilities are closed and many people are staying home to avoid this deadly virus. Getting outside is still important for good mental and physical health. The typical hazards to consider are:

- Avoid sunburns.
- Stay hydrated.
- Pay attention to the environment.
- Learn or review safety measures for any adventure before you get started – mountain climbing, kayaking, open water swimming, diving, etc.
- Be sure children are taught these same safety measures and are appropriately supplied and supervised when enjoying these fun activities.
- Drink alcohol responsibly.
- Keep correct safety in mind for all passengers in all vehicles.

The Centers for Disease Control and Prevention (CDC) also recommends the following when you venture outside to play in this time of pandemic:

- Visit places that are close to your home.
- Check with the park or recreation area in advance to prepare safety and to find out if the bathroom facilities are open and what services are available.
- Stay at least 6 feet away from others you don't live with (social distancing) and do all you can to prevent exposure to COVID-19.
- Carefully consider use of playgrounds and help children follow guidelines.
- Play it safe around and in swimming pools, hot tubs, and water playgrounds by keeping space between yourself and others.
- Avoid going out if you are sick or tested positive for the virus.
- Avoid crowds.

We hope you still enjoy your summer!

Resources: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/visitors.html>
<https://www.med.navy.mil/files/nmcp/hc/health-promotion/Pages/hc-toolbox-july.aspx>

NAVY AND MARINE CORPS PUBLIC HEALTH CENTER

NMCPHC Trainings and Conferences

Disease Reporting System internet (DRSi) Webinars

September 29, 2020: DoD Influenza Surveillance

October 27, 2020: HIV PrEP

Occupational and Environmental Medicine (OEM) Fundamentals Course

September 14-18, 2020: Naval Medical Center
Portsmouth, VA. (Registration not yet opened)

Tobacco Cessation Facilitator Training

November 11, 2020: 0730 - 1630, Norfolk
Branch Health Clinic, Norfolk VA.
Contact POC at (757) 953-8813